

CAREFUL ANTIBIOTIC USE

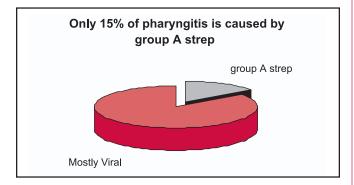
To avoid antibiotic resistance: treat only proven group A strep

PHARYNGITIS

"If you are entirely comfortable selecting which pharyngitis patients to treat 10 days with penicillin, perhaps you don't understand the situation."

- Stillerman and Bernstein, 1961

■ Most sore throats are caused by viral agents.¹



■ Clinical findings alone do not adequately distinguish Strep vs. Non-Strep pharyngitis. ²

BUT, prominent rhinorrhea, cough, hoarseness, conjuntivitis, or diarrhea suggest a VIRAL etiology. $^{\rm 3}$

Antigen tests (rapid Strep kits) or culture should be positive before beginning antibiotic treatment.

Experts suggest confirming negative results on antigen tests with culture.⁴

Experts discourage treatment pending culture results⁴⁻⁵, but if you do...

- Make sure to stop antibiotics when culture is negative.
- Discourage parents from saving antibiotics.

If an antibiotic is prescribed:

■ Use a penicillin as treatment for group A strep. 6

NO group A strep are resistant to penicillin. Treatment is 90% effective at elimination of strep, and may be higher in the prevention of acute rheumatic fever (ARF). Carriers are at very low risk for both ARF and spreading infection.⁶

■ Use erythromycin if penicillin allergic.

Remember that most cases with clinical signs of strep, like exudate and adenopathy, are viral.

References

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- 4. American Academy of Pediatrics. Group A streptococcal infections. In: Peter G, ed. 1997 Red Book: Report of the Committee on infectious Diseases. 24th ed. Elk Grove, IL: American Academy of Pediatrics; 1997:483.
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